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TITLE: Preventing Health Damaging Behaviors in Male and Female Army Recruits

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14. ABSTRACT Healt	th damaging behavio	rs of young military per	sonnel are reflections	of health proble	ems facing all young people in the U.S.
					k for health damaging behaviors.
					(STIs), unintended pregnancies (UIPs),
					I (dating or marital) relationships. The
					only result in illness or injury, but also
negatively impact pe	rformance of military	duties and threaten m	ilitary readiness. Desp	ite military lead	ership in setting standards and policies
regarding profession	al behavior and unive	ersal health care for pro	eventing and eliminati	ng such negativ	e health outcomes, many health
					tive-behavioral, skills-building
					ersonal sexual violence. This research
					impact military performance and
		cations for health prom	otion and disease pre	vention education	on strategies designed to reach military
men and women ear	men and women early in their careers.				
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### TABLE OF CONTENTS

Introduction	4
Body	4
Key Research Accomplishments	7
Reportable Outcomes	7
Conclusions	8
References	8
Appendices	9
Supporting Data	9

### 3. INTRODUCTION

The proposed study will utilize a group, randomized controlled study design to evaluate the effectiveness of a cognitive-behavioral intervention to: (1) prevent sexually transmitted infections (STIs), unintended pregnancies (UIPs), alcohol and other substance misuse, and exposure to or involvement with personal sexual violence among Army recruits; (2) reduce participants' risk for STIs, UIPs, alcohol and other substance misuse, and exposure to or involvement with personal sexual violence by (a) decreasing gaps in knowledge and misperceptions about risk and prevention, (b) increasing motivation to change risk behaviors, (c) building effective skills to engage in health promoting behaviors, (d) decreasing sexual risk behavior; and (3) determine the best strategy for educating participants about the sensitive health matters such as STIs, UIPs, alcohol and other substance misuse, and exposure to or involvement with personal sexual violence. Additionally, all participants will complete self-administered questionnaires and will be screened for STIs (*C. trachomatis* and *N. gonorrhoeae*) at baseline and 12 months post-intervention and will be screened for pregnancy/UIP at 12 months.

### **4. BODY**

Research activities accomplished in calendar year from January 1, 2008 through December 31, 2008 are detailed below under SOW activity 3.

### STATEMENT OF WORK (SOW)

- 1. Brief commanding officers of the Department of the Army, Headquarters, U.S. Army Training Center and Fort Jackson, Fort Jackson, SC.
  - a. We have briefed COL Thomas Hayden, COL James Mundy, COL Dunemn, LTC Larry Andreo, and LTC Sonya Corum. **This activity was completed in May 2006**.
- 2. Conduct focus groups to assist in the development of: (1) comparable gender-specific interventions to reduce health damaging behaviors associated with sexually transmitted infections (STIs), unintended pregnancies (UIPs), alcohol and other substance misuse, and personal sexual violence; and (2) pre- and post-intervention self-administered questionnaires to assess knowledge, attitudes, and beliefs, and behaviors associated with STIs, UIPs, alcohol and other substance misuse, and personal sexual violence. This activity was completed in September 2007. See a detailed summary below.
  - a. Institutional Review Board (IRB) approval to conduct focus groups was received from the United States Army Medical Research and Materiel Command (USAMRMC) Human Research Protection Office in May 2007 and the University of California, San Francisco, Committee on Human Research, initially in March 2007 and re-approved with modifications requested by the USAMRMC Human Subjects Research Review Board (HSRRB) May 2007.
  - b. The primary purpose of the focus groups (anonymous small-group discussions) was to determine the best intervention strategy to affect behavioral change among soldiers in

Advance Individual Training (AIT) at Fort Jackson, the group who will be the focus of this intervention research to prevent sexually transmitted infections (STIs) and unintended pregnancies (UIPs). Another purpose of the focus group discussion was to better understand AIT soldiers' knowledge, attitudes, beliefs, and behaviors related to risk and prevention of STIs, UIPs, and alcohol and substance misuse. In addition, the information gathered from the focus group discussions was to better understand the Army-specific context in which health behaviors occur. For example, we were interested in learning how a recent or impending deployment may influence risk for STIs, UIPs, and alcohol and substance misuse.

- c. Six separate male and female focus groups were conducted at Fort Jackson in Columbia, SC on September 28-29, 2007. Four groups were among soldiers in AIT (two male and two female groups) and two groups among junior enlisted personnel (one male and one female).
- d. Results of the focus group discussion indicate a clear need for Army-specific interventions to prevent the risk of behaviors related to the acquisition and transmission of STIs and UIPs by increasing accurate knowledge, improving protective attitudes, enhancing motivation to enact behavior change, increasing communication, problem-solving, and decision-making skills to reduce STI- and UIP-related skills. Specifically, three major areas of potential risk were identified:
  - a.) In male-female soldiers social interactions during periods of leave
  - b.) During weekend leaves male and female AIT soldiers socialize at clubs, malls, and other places. While all do not engage in activities that may increase their risk for STIs and UIPs, some do drink and engage in unprotected sexual behavior.
  - c.) Although some indicated knowledge regarding methods of reducing risk, including abstinence from drinking or drinking in moderation and/or abstinence from sexual activity or using barrier methods to reduce risk during sexual behavior, some reported limited or incorrect knowledge, negative attitudes, a lack of motivation and skills to reduce their risk while engaging in these behaviors.
  - d.) Both male and female soldiers indicated that STIs and UIPs are of concern for them and heard of instances where these negative health outcomes have occurred.
  - e.) Some soldiers reported that going to the Troop Medical Clinic is a great place to go for reproductive health concerns such as STIs or pregnancy, some indicated concern that their health information would not be kept privacy, which may prevent them from seeking healthcare in a timely manner or for prevention purposes.
  - f.) When transitioning from AIT training to first duty station, especially on a new post
  - g.) Junior enlisted soldiers, especially female soldiers, reported knowledge of instances when soldiers first arrive to a new duty station, they receive a great deal of attention from male soldiers. It was reported that some soldiers are motivated by genuinely helping the "newbie" and some are motivated by possible opportunities for selfish reasons such as garnering attention or even dates. Some soldiers perceived this to be a particularly vulnerable time for female soldiers, especially those who are naïve or unsuspecting of the other the person(s) motives.

- h.) Some soldiers (especially female soldiers) indicated that there is a need for training to give young male and female soldiers skills about how to handle social transitions to a new post.
- e. When learning about their initial deployment abroad (e.g., Iraq)
  - a.) Both male and female soldiers reported feelings of being prepared for deployment in terms of their technical skills, but reported apprehension about the unknown and unexpected things to come; concern that family members and other love ones will worry about them; and unease about not having opportunities for rest and relaxation during long periods of deployment.
  - b.) As a result of these concerns, some soldiers reported an accelerated rate of engaging in some behaviors including drinking more and/or engaging in sexual activity.
  - c.) Along these lines some reported (males) wanting to make sure they leave a legacy (child) behind if the event that they do not return from deployment, thus prompting opportunities for engaging in unprotected sexual intercourse.
- 3. Develop comparable gender-specific interventions for male and female Army recruits to: (1) prevent acquisition of STIs and UIPs; and (2) reduce the risk of STI- and UIP-related behaviors including alcohol and other substance misuse, and personal sexual violence. **This activity was completed in December 2008. See a brief summary below.** 
  - a. Army-specific interventions were developed on the basis of results of the focus groups and on the basis of current literature in the fields of STI/HIV prevention, nutrition, fitness, and physical injury prevention. Specifically, we developed curriculum, including the training manual for the STI/UIP prevention intervention, and an Army-specific video to reinforce health promotion information. The video is entitled, Off Post. The intervention is entitled, Staying Safe and in Control: Increasing Knowledge and Building Skills to Prevent Sexually Transmitted Infections and Unintended **Pregnancies.** See Appendix 1 for an outline of the modules for each of the five sessions of the intervention's training manual. In addition, for the comparison group, an intervention was developed that focused on nutrition, physical fitness, and injury prevention was developed. This intervention is entitled, Fit You: Practical Tools for Healthy Eating, Physical Fitness, and Injury Prevention. See Appendix 2 for an outline of the intervention's training manual. Finally, based on our focus group discussions, as noted above, it is apparent that due to the manner in which AIT soldiers are trained and the common concerns, the focus of the interventions will be co-ed, but they could be readily administered separately for male and female soldiers. A brief overview of both intervention curricula are outlined below.

The following SOW activities have not been completed, as they are contingent upon activities yet to be accomplished. Specifically, IRB approval from the University of California, San Francisco, CHR and the HSRRB are required prior to the initiation of the following activities. We plan to submit an IRB protocol to the CHR in the next month. Upon approval, we will submit a protocol to the HSRRB for approval to conduct the pilot test of the study's intervention materials including the pre-and post-test questionnaires and specimen collection protocol as noted below.

- 4. Pilot-test the gender-specific interventions, self-administered questionnaires, and the biological specimen collection protocol for feasibility.
- 5. Implement the intervention within the context of basic training.
- 6. Conduct a 12-month follow-up of intervention participants.
- 7. Evaluate the effectiveness of each gender-specific intervention and compare differences across interventions on study participants' acquisition of STIs and UIPs during their first year of military service.
- 8. Examine key sub-questions related to STIs and UIPs: (1) assess psychosocial, behavioral, and contextual factors associated with STIs and STI-related risk at baseline and STIs and UIPS at follow-up; (2) document the prevalence of personal sexual violence at basic training entry; (3) examine relationships among personal sexual violence, STIs, and STI-related risk at baseline and STIs and UIPS at follow-up; and (3) determine the relationship between alcohol and other substance misuse and personal sexual violence and the relationship of these factors to STIs and STI-related risk at baseline and STIs and UIPS at follow-up.
- 9. Disseminate study findings through: (1) briefs given to participating military commands; (2) presentations at military-specific preventive medicine meetings as well as annual scientific meetings; and (3) publications submitted to scientific journals.

### 5. KEY RESEARCH ACCOMPLISHMENTS TO DATE

Our research accomplishments to date include: (1) Identification of a suitable cohort in which to implement the proposed research (see description of these activities in the Body section above. (2) Examination of scientific literature and published interventions in order to identify elements of effective interventions to prevent STIs, UIPs, alcohol and other substance misuse, and personal sexual violence to guide the development of interventions in the proposed research (see our previous annual report dated January 20, 2006). (3) Completion of focus group discussions served as the foundational material for the development of the intervention to prevent STIs and UIPs in soldiers undergoing AIT trainees. (4) Completion of the curriculum, including the training manuals for both the experimental and control group arms of the study.

### 6. REPORTABLE OUTCOMES

There are no reportable outcomes to date.

### PROPOSED PROJECT ACTIVITIES:

Our plans for the coming year include completing SOW activities outlined in items 4 and 5 above. Specifically, we plan to: (1) complete the self-administered questionnaires that will be used to evaluate the effectiveness and efficacy of the intervention; (2) develop the biological specimen collection protocol; (3) submit IRB protocols to the University of California, San

Francisco CHR and the USAMRMC HSRRB; (3) pilot-test the STI and UIP intervention materials as well as the comparison nutrition, fitness, and injury prevention intervention's materials; and (4) implement the interventions within the context AIT, Fort Jackson, SC.

### 7. CONCLUSIONS

There are no scientific conclusions that can be made at this time.

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### 9. APPENDICES

**Appendix 1:** An overview of the training manual, *Staying Safe and in Control: Increasing Knowledge and Building Skills to Prevent Sexually Transmitted Infections and Unintended Pregnancies* 

**Appendix 2:** An overview of the manual, *Fit You: Practical Tools for Healthy Eating, Physical Fitness, and Injury Prevention* 

### 10. SUPPORTING DATA

None.

### Appendix 1.

Safe and In Control: Increasing Knowledge and Building Skills to Prevent Sexually Transmitted Infections and Unintended Pregnancies

Session overviews



### **OVERVIEW**

### **OBJECTIVES:**

- Provide basic information on the effects of alcohol.
- Identify personal style of alcohol use
- Teach about styles of alcohol use and their affects on sexual risks
- Identify and set limits for future alcohol consumption

### TIME:

120 minutes

### **MATERIALS:**

Computer, LCD projector, Screen (if necessary), Session 1 PowerPoint slide set, "Life Goals" worksheet, pencils, "My Leave Time" worksheet, markers, self-sticking chart paper for listing potential consequences for living in the "Out-of-Control Zone", "Pattern of Alcohol Use" handout, "Alcohol Use and Sexuality" handout, "Saturday Night" handout, five pieces of self-adhesive flip chart paper that states, "Working Together To Drink Safely: Things I Can Do to Stay Safe and in Control while Drinking Alcohol" handout, "My Drinking Assessment" Worksheet

### **FORMAT:**

Interactive PowerPoint slide presentation

INTRODUCTION	Overview of the Program and Session 1	10 MINUTES
MODULE 1	Life Goals	15 MINUTES
MODULE 2	My Leave Time	20 MINUTES
BREAK		5 MINUTES
MODULE 3	Alcohol Effects and Use	20 MINUTES
MODULE 4	Saturday Night	15 MINUTES
MODULE 5	Working Together to Drink Safely	20 MINUTES
MODULE 6	Drinking Styles and Self Assessment	12 MINUTES
WRAP-UP		3 MINUTES

Summarize Session and Introduce Session 2

### Session 2: Overview

# **SESSION 2**

### **OVERVIEW**

### **OBJECTIVES:**

- Identify and simulate social and environmental factors that increase and reduce participants' risk for STIs and UIPs during AIT
- Examine strategies for reducing participants' risk for STIs and UIPs during AIT
- Identify factors that make talking about sex with a partner challenging for men and women
- Provide practical tips for making it easier to talk with a sex partner (about risk and prevention of STIs and UIPs)

### TIME:

120 minutes

### **MATERIALS:**

Computer, LCD projector, Session 2 PowerPoint slide set, "Off Post" video, TV/DVD player, "Talking About Sex" handout, "Tips for Talking with Your Partner" handout

INTRODUCTION		5 MINUTES
	Review of Previous Session and Overview of Session 2	
		FO MINILITES
MODULE 1		50 MINUTES
	Video Viewing and Discussion	
BREAK		5 MINUTES
DREAK		3 WIII VOTEO
MODULE 2		55 MINUTES
		00 1/11/10 120
	Talking About Sex	
WDADLID		5 MINUTES
_WRAP-UP		3 WIIINO I LO

Summarize Session and Introduce Session 3

### **OVERVIEW**

### **OBJECTIVES:**

- Provide an overview of basic reproductive anatomy and physiology
- Define vaginal, anal, and oral intercourse (sex)
- Provide an overview of prevalent STIs with a focus on risk, transmission, symptoms, treatment, and consequences
- Discuss concrete and specific strategies for preventing STIs
- Assess risk for acquiring an STI, including HIV
- Identify personal limits regarding their risky behaviors and intentions
- Discuss effective use of condoms
- Examine steps for proper condom use
- Examine and discuss barriers to condom use
- To discuss strategies for talking to their sex partner(s) about condom use

### TIME:

120 minutes

### **MATERIALS:**

Computer, LCD projector, Session 2 PowerPoint slide set, STI Fact Sheet Handout series (stapled together to be given to each participant), "Personal Risk Assessment" handout, "Scoring Guide" handout, "Steps to Effective Condom Use: Observer Checklist" handout (with Condom Questions on the back side), Condom Questions For Participants Visiting Stations 3 and 4, 24 condoms (four different brands or types) for the break-out activity, Station 1 and 2 materials: (two penis models, two water-based lubricants and 50 condoms to be split between the two stations), Station 3 and 4 materials: (a variety of water-based lubricants, condoms [50-100], condom carriers, a few dental dams, a few female condoms to be split between the two stations), "I Use Condoms" worksheet, "I Use Condoms" facilitator discussion guide

INTRODUCTION		5 MINUTES
MODULE 1		15 MINUTES
MODULE 2	Anatomy and Physiology Basics	25 MINUTES
	Sexually Transmitted Infections: Knowing the Facts	
BREAK		5 MINUTES
MODULE 3		15 MINUTES
MODULE 4	Assessing Your Personal Risk	30 MINUTES
	Condom Works	20 MINUTES
MODULE 5	"Let's Talk About Condoms"	20 WIINUTES
WRAP-UP	Summarize Session and Introduce Session 4	5 MINUTES

### **OVERVIEW**

### **OBJECTIVES:**

- Provide accurate information about pregnancy
- Describe basic information about prescription and non-prescription methods of contraceptives
- Increase awareness of the impact of an unintended pregnancy on their lives and careers
- Increase awareness of the impact of an unintended pregnancy on their lives and career
- Give basic information about non-prescription methods of contraceptives, including condoms, spermicides, and the Morning After Pill
- Increase awareness of the impact of an unintended pregnancy on their lives and career
- Describe information on a range of options available to prevent an unintended pregnancy and to explore sources of support
- Analyze and discuss personal preference and lifestyle factors related to preventing unintended pregnancies and STIs

### TIME:

120 minutes

### **MATERIALS:**

Computer, LCD projector, Session 4 PowerPoint slide set, two different types of candy (e.g., peppermint and butterscotch), "Myth Or Fact?" handout, "Myth Or Fact?" answer sheet, "Pregnancy Test: Going To The TMC" facilitator Sheet, "Pregnancy Test: Getting The Results" facilitator sheet, "Best Case Scenario" worksheet

INTRODUCTION		5 MINUTES
	Brief Review of Previous Session and Preview of Session 5	
MODULE 1		15 MINUTES
	Pregnancy Facts	
MODULE 2		55 MINUTES
	Contraceptive Methods Overview and Prescription Methods of C (25 minutes) Pregnancy Test: Going to the TMC (10 minutes) Non-Prescription Methods of Contraceptives (10 minutes) Pregnancy Test: Getting the Results (10 minutes)	ontraceptives
BREAK		5 MINUTES
MODULE 3		15 MINUTES
	Pregnancy Options and Support	
MODULE 4		20 MINUTES
	Best Case Scenario	
WRAP-UP		5 MINUTES

### **OVERVIEW**

### **OBJECTIVES:**

- Provide information about and practice how to refuse unwanted offers in an effective and assertive manner
- Give an opportunity to learn about identifying and preventing intimate partner violence
- Conclude the program with a visual summary of the program's objectives and activities that were covered and to obtain feedback on the overall program

### TIME:

120 minutes

### MATERIALS:

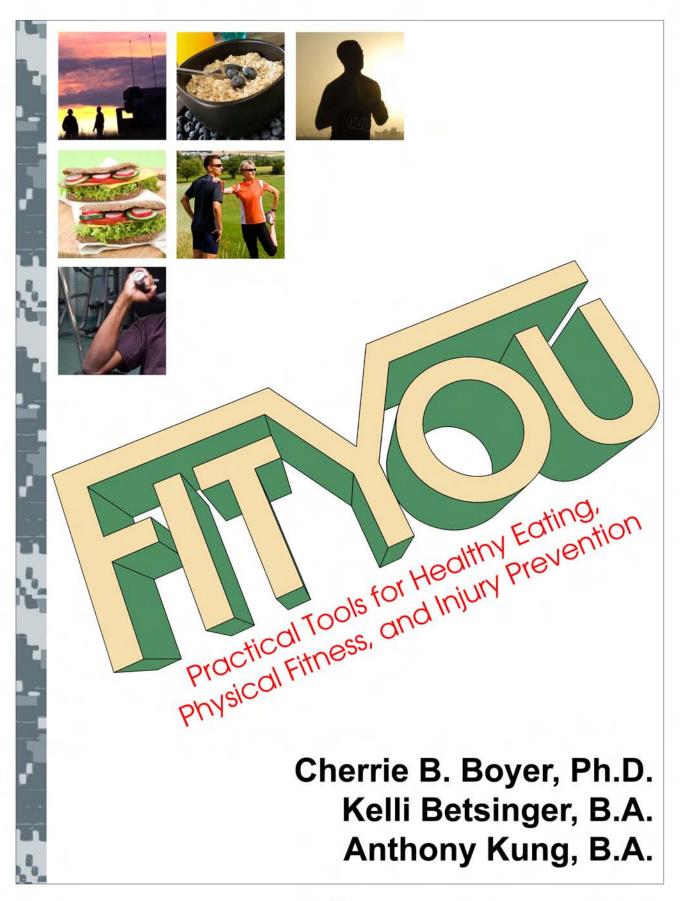
Computer, LCD projector, Session 5 PowerPoint slide set, "Observation Checklist" handout, "Assertive Refusal" handout, "Role Play for Skill Practice" Refusal Scenarios (1 page cut into strips for each group), "Intimate Partner Violence" Fact Cards (facts on index cards or strips of card stock), "How to Prevent Intimate Partner Violence" handout, "If Intimate Partner Violence Occurs" handout, large white/chalk board/rolled paper (or four to eight pieces of flip chart paper on the wall in the shape of square or rectangle), different color markers, "Wrap-Up" Questionnaire

INTRODUCTION	Review of Previous Session and Overview of Session 4	5 MINUTES
MODULE 1	Review of Frevious Session and Overview of Session 4	55 MINUTES
WODULE 1	Saying "No"	1 00 1/11/01/20
BREAK		5 MINUTES
MODULE 2		25 MINUTES
MODULE 2	Preventing Intimate Partner Violence	23 1/11110120
MODULE 3	Health Osma Assess	10 MINUTES
	Health Care Access	
FINAL WRAP-UP	Chalk Talk Wrap-up Forms	20 MINUTES

### Appendix 2.

### Fit You: Practical Tools for Healthy Eating, Physical Fitness, and Injury Prevention

Session overviews



### **OVERVIEW**

### **OBJECTIVES:**

- Identify individual, cultural, social influences on nutritional choices
- Encourage personal responsibility for setting goals, increasing motivation, and building skills required to meet individualized dietary needs and fitness goals
- Discuss dietary recommendations (introduction to military-based nutrition for physical performance)
- Define nutritional requirements for peak physical performance
- Define basic fitness concepts
- Encourage personal responsibility for setting goals, increasing motivation, and building skills required to meet individualized dietary needs and fitness goals (develop a personal risk assessment)
- Define nutritional requirements for peak physical performance
- Define basic concepts of fitness (set training goals)
- Build skills for developing a personal fitness program for peak performance

### TIME:

120 minutes

### **MATERIALS:**

DVD with Supersize Me clip, Laptop, LCD projector, extension cord, and handout of follow-up questions, PowerPoint Files, paper, pencils "Personal Risk Assessment" worksheet.

### **FORMAT:**

Interactive PowerPoint slide presentation

MODULE 1		5 MINUTES
	Welcome and Program Overview	
MODULE 2		25 MINUTES
	"Supersize Me" – A Film of Epic Proportions	
MODULE 3		40 MINUTES
	Nutrition and Health for Peak Performance	
MODULE 4		15 MINUTES
	Personal Risk Assessment	
MODULE 5		35 MINUTES
	Fitness and Physical Activity	_

### **OVERVIEW**

### **OBJECTIVES:**

- Discuss dietary recommendations (evaluate daily dietary intake)
- Identify healthier choices of foods when shopping in markets or eating in restaurants and mess halls
- Increase skills in reading and using food labels to meet nutritional needs (introduce food label reading)
- Identify individual, cultural, and social influences on nutritional choices (introduce decision-making skills for eating out, snacking, and shopping)
- Define basic fitness concepts (introduce the concept of working with a training log)
- Develop a personal fitness program for peak performance (introduce practical online tools to aide in developing peak performance)
- Reduce risk of physical training and work place injuries

### TIME:

120 minutes

### **MATERIALS:**

Worksheet and pencils, Food labels, TV, Laptop, LCD projector, extension cord, Reading and Understanding the New Food Label DVD, Training Log handouts.

### FORMAT:

Interactive PowerPoint slide presentation

MODULE 1		15 MINUTES
	Introduction to the Dietary Recall Worksheet	-
MODULE 2		30 MINUTES
	Food Label Video	•
MODULE 3		40 MINUTES
MODULE 3	Restaurant, Snacking and Shopping Basics Slide Set	10 11
MODULE 4		15 MINUTES
	Starting and Working with a Training Log	_
MODULE 5		20 MINUTES
	Demonstration of On-line Tools	-

### **OVERVIEW**

### **OBJECTIVES:**

- Discuss USDA Dietary Recommendations (build knowledge to prevent physical training, sports, and workplace injury)
- Identify healthier choices of foods when shopping in markets or eating in restaurants and mess halls
- Reduce risk of physical training, sports, and workplace injuries (increase knowledge about "First Aid")
- Identify basic physical injuries and initiate care
- Identify healthier choices in markets, restaurants and mess halls
- Define nutritional requirements for peak physical performance
- Develop a personal fitness program for peak performance
- Increase skills in reading and using food labels to meet nutritional needs
- Discuss dietary recommendations for choosing whole grains
- Increase awareness of the importance of taking personal responsibility for goals, motivation and skills required to meet individualized dietary needs and fitness goals

### TIME:

120 minutes

### MATERIALS:

Examples of completed worksheets, whiteboard, dry erase markers (or butcher paper and markers, if whiteboard is not available), PowerPoint File, Laptop, LCD projector, extension cord (if necessary), Daily Menu and Salad Bar Selection Sheets, pencils, a large selection of pre-collected food labels, Fit You Goal Setting worksheet and pencils

### **FORMAT:**

Interactive PowerPoint slide presentation

MODULE 1		15 MINUTES
	Dietary Recall Worksheet Discussion	_
MODULE 2		30 MINUTES
	Sports and Work Place Injury Prevention and "First Aid"	
MODULE 3		15 MINUTES
MODOLL 0	Selecting the Best Breads	
MODULE 4		20 MINUTES
MODOLL I	Peak Performance for APFT	
MODULE 5		30 MINUTES
_MODOEL 0	But I Eat in the Mess Hall	
MODULE 6		10 MINUTES
-MODUEL 0	Healthy Goal Setting Journal	

Healthy Goal Setting Journal

### **OVERVIEW**

### **OBJECTIVES:**

- Discuss USDA Dietary Recommendations (evaluate daily food (caloric) intake)
- Identify healthier choices of foods when shopping in markets or eating in restaurants and mess halls (discuss Army nutritional environments)
- Identify and discuss individual, cultural, and social factors that influence one's food choices and decisions about fitness (offer practical tips for preparing for Army Physical Fitness Test (APFT) Day
- Develop a personal fitness program for peak performance (establish short- and long-term goal setting skills for healthy food choices and physical activity)

### TIME:

120 minutes

### MATERIALS:

Examples of completed worksheets, whiteboard, dry erase markers (or butcher paper and markers, if whiteboard is not available), PowerPoint File, Laptop, LCD projector and extension cord (if necessary)

### **FORMAT:**

Interactive PowerPoint slide presentation

MODULE 1		20 MINUTES
	Healthy Goal Setting Journal Discussion	•
MODULE 2		25 MINUTES
	Cultural Influences on Health and Fitness	
MODULE 3		30 MINUTES
	High Caliber Nutrition	
MODULE 4		30 MINUTES
	Stress and Stress Reduction Techniques	_
MODULE 5		15 MINUTES
	Online Fitness Communities	

### **OVERVIEW**

### **OBJECTIVES:**

- Identify healthier food choices while shopping in markets or eating in restaurants and mess halls (discuss emotional eating choices)
- Take personal responsibility for goals, motivation and skills required to meet individualized dietary needs and fitness goals (encourage self-assessment and goal setting for a healthy lifestyle)
- Provide participants with information about the effects of alcohol use
- Increase participants' skills in taking personal responsibility for goals, motivation and skills required to meet individualized dietary needs and fitness goals (reaffirm personal commitments made over the five sessions)
- Conclude the program and solicit feedback on the materials presented

### TIME:

130 minutes

### **MATERIALS:**

PowerPoint File, Laptop, LCD projector and extension cord (if necessary), PowerPoint Presentations: "Pattern of Alcohol Use" and "Alcohol Use and Sexuality" handouts, Wrap-up Questionnaire, pencils

### **FORMAT:**

Interactive PowerPoint slide presentation

MODULE 1		20 MINUTES
	Contemporary Comfort Food	•
		25 MINUTES
MODULE 2		20 MINO 1 E9
	Building on Personal Commitment to a Healthy Lifestyle	-
	_	
MODULE 3		55 MINUTES
	Alcohol Effects and Use	
MODULE 4		15 MINUTES
	Fit You FAQs	•
MODULE 5		15 MINUTES
	Review and Wrap-up	-